

Happy New Year! from the SD Diabetes Prevention & Control Program (DPCP) and welcome to the January 5, 2009 edition of the "DPCP FYI". Each FYI is received by over 450 diabetes care professionals in and around South Dakota. If you have trouble with the links, the e-bulletin is also posted on the DPCP website at <http://diabetes.sd.gov>. If you have suggestions for improvement to the FYI or if I can otherwise be of assistance, please let me know. Colette

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Save the Date-Changes and Challenges in Diabetes Care 2009

The SD Diabetes Prevention & Control Program will hold "Changes and Challenges in Diabetes Care 2009" April 7-8 in Watertown. Further information and registration is forthcoming. The conference is intended for nurses, dietitians, nurse practitioners, physician assistants, pharmacists, and other health care professionals who provide care and education to people with diabetes and their families. Come and get an update on diabetes, network with others involved in diabetes care, and learn of products and services for those with diabetes.

www.BeFreeSD.com Launched

The South Dakota Tobacco Control Program is pleased to introduce www.BeFreeSD.com, a website promoting places to live, work and play tobacco-free in South Dakota.

Revised DPCP Website

Please visit the revised DPCP website at <http://diabetes.sd.us>. All information has been grouped under two themes, DIABETES AND ME and PROFESSIONAL RESOURCES. We believe the site is easier to navigate and more comprehensive in scope. Components continue to be added so check back often.

New "Link" Cards Available

New Diabetes Information Link program registration cards are available from the Department of Health Educational Materials Catalog at <http://doh.sd.gov/catalog.aspx>. Please recycle any old Link registration cards you may have.

The Diabetes Information Link program is available free of charge to all South Dakotans with diabetes. Upon registration, recipients receive a cookbook developed by the DPCP called *Healthy Diabetes Recipes and More*, a book titled Take Charge of Your Diabetes, a publication of the US Dept. of Health and Human Services, and brochures about how diabetes can affect the heart, mouth, eyes, and feet, who constitutes their diabetes care team, when to contact members of that team, etc. Then about quarterly, all recipients receive information on the topic(s) chosen by the DPCP and collaborating partners. The Link's intent is to provide information on necessary preventive services, healthy eating, being active, problem solving, health coping, resources and much more.

Tool to Help Explain Glomerular Filtration Rate (GFR)

Could you use a tool on how to talk to patients about this important kidney function measure? The National Kidney Diabetes Education Program (NKDEP) has created a new tool for clinicians to help explain GFR results to their patients. *Explaining GFR: A Tear-off Pad for Clinical Use* includes 50 easy-to-read patient education sheets and provides key concepts and talking points for providers on educating patients about chronic kidney disease (CKD). To view, download, or order up to five GFR pads for free, visit NKDEP's website, www.nkdep.nih.gov/resources/ExplainingGFR.htm.

Patient Perceptions of Quality of Life with Diabetes-Related Complications and Treatments

Many patients with diabetes say that the inconvenience and discomfort of constant therapeutic vigilance, particularly multiple daily insulin injections, has as much impact on their quality of life as the burden of intermediate complications, researchers from the University of Chicago reported in the October 2007 issue of *Diabetes Care*.

"The people who care for patients with a chronic disease like diabetes think about that disease and about preventing long-term complications," said study author Elbert Huang, MD, assistant professor of medicine at the University of Chicago. "The people who have a chronic disease think about their immediate lives, which include the day-to-day costs and inconvenience of a multi-drug regimen. The consequences are often poor compliance, which means long-term complications, which will then require more medications. It is hard to convince some patients to invest their time and effort now in rigorous adherence to a complex regimen with no immediate reward, just the promise of better health years from now," Huang said.

Huang and colleagues asked patients to rank the benefits of various treatments and the daily quality-of-life burdens of diabetes-associated complications. Patients were asked to express their preferences in a series of trade-offs. The surveyors asked, for example: would you rather have six years of life in perfect health, or ten years with an amputation"

Patients varied widely in how they ranked treatments and complications. Those who had experience with a specific medication or complication saw them as having less of an impact on quality of life than those without such direct experience. But many patients found both complications and treatment onerous. Between 12 and 50 percent were willing to give up 8 of 10 years of life in perfect health to avoid life with complications. More surprising, between 10 and 18 percent of patients were willing to give up 8 of 10 years of healthy life to avoid life with treatments. The full report is available at <http://care.diabetesjournals.org/cgi/content/abstract/30/10/2478>.

New CDC Study Finds Community Physical Activity Programs Are Money Well Spent

Community-based physical activity interventions designed to promote more active lifestyles among adults are cost-effective in reducing type 2 diabetes, heart disease, stroke, and colorectal and breast cancers according to a study by the Centers for Disease Control and Prevention, with support from the Robert Wood Johnson Foundation.

Using a rigorous economic model developed to assess the cost-effectiveness of community-based physical activity interventions, the study found these interventions to be cost-effective; reducing new cases of many chronic diseases and improving quality of life. Researchers found that community-based physical activity programs appeared to reduce new cases of disease by: 5-15 cases per 100,000 people for colon cancer; 15-58 cases per 100,000 for breast cancer; 59-207 cases per 100,000 for type 2 diabetes, and 140-476 cases per 100,000 for heart disease.

Community-based physical activity interventions broadly fall under the following strategies:

- Community campaigns such as mass communication efforts (TV/radio, newspapers, billboards, advertisements).
- Social support networks such as exercise groups to encourage behavior change.

- Tailored behavior change to encourage people to set physical activity goals and monitor their individual progress.
- Enhanced access to services that support active lifestyles such as fitness centers, bike paths and walking trails.

"Our study found that public health strategies that promote physical activity are cost effective, and compared with other well-accepted prevention strategies, such as treatment for high cholesterol or motor vehicle air bags, offer good value for the money spent," said Larissa Roux, M.D., Ph.D., lead author of the study.

The study, "Cost Effectiveness of Community-Based Physical Activity Intervention," is being published in the online version of the American Journal of Preventive Medicine. The full study is available by sending a request to eAJPM@ucsd.edu.

"This study supports the value and effectiveness of the physical activity interventions that were studied," said William Dietz, M.D., Ph.D., director of CDC's Division of Nutrition, Physical Activity and Obesity. "This study also shows the importance of the new physical activity guidelines put forth last month by the U.S. Department of Health and Human Services." The HHS guidelines recommend:

- Two and a half hours each week of moderate-intensity aerobic activity, such as brisk walking or,
- An hour and 15 minutes each week of vigorous-intensity aerobic activity such as jogging or running.

In addition, all adults should include muscle strengthening activities that work all the major muscle groups on two or more days per week.

Save the Date-South Dakota Diabetes Coalition Partners' Conference

The 2009 South Dakota Diabetes Coalition Partners' Conference is scheduled for September 9th.

If you have received this FYI from a colleague and you'd like to subscribe or to unsubscribe, contact Colette at the email below.

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